

Missouri Ethics Commission (MEC)
PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov

Missouri Ethics Commission Office Use:

Statement of Committee Organization

Date: D 24 18 Type: New & Amended (if amending, enter MECID C 2 33 4 8. section changed 2. Committee Information F C F F F F F F F F	1.	Statement Information		
2. Committee Information Continue Chairman Continue Chairman		Date: 10 22 18		
Canadidate Committee Committee Canadidate Canadidate Continuing Canadidate Canad		Type: New Amended (if amending, enter MEC ID C 2 33 4 & section changed)		
Signature of Committee Political Party Par	2.	Committee Information		
Treasurer's Marine Andreas City, Sarie, & Zip Standard Committee Type: Campaign Candidate Continuing (PAC) Debt Service Exploratory Political Party		Citizens to Elect Alm	Suly Cogranes	
St. Louis Cuty Country Clerk or Board of Section Commissions Committee Type: Campaign Candidate Continuing (PAC) Debt Service Exploratory Political Party Treasurer/Deputy Treasurer Information Carrolled Candidate Continuing (PAC) Debt Service Exploratory Political Party		P.O BOX 24782	(314) 629-862	
Committee Type:		Address. City. State, & Zip	Telephone Number	
3. Treasurer / Deputy Treasurer Information Treasurer's Mailing Address, City, State, & Zip Deputy Treasurer's Mailing Address, City, State, & Zip Cannoted Organization's Mailing Address, City, State, & Zip CANDIDATES: Do you have more than one candidate committee? Candidate Supported or Opposed (candidate committees) Candidate Supported or Opposed (candidate committees) Candidate Supported or Opposed (candidate Committees) Deputy Treasurer's Mailing Address, City, State, & Zip Candidate Supported or Opposed (candidate Committees) Deputy Treasurer's Mailing Address, City, State, & Zip Candidate Supported or Opposed (candidate Committees) Deputy Treasurer's Mailing Address, City, State, & Zip Candidate Supported or Opposed (candidate Committees) Deputy Treasurer's Mailing Address, City, State, & Zip Candidate Support or Opposed (candidate Committees) Deputy Treasurer's Mailing Address, City, State, & Zip Candidate Support or Opposed (candidate Committees) Deputy Treasurer's Mailing Address, City, State, & Zip Candidate Support or Opposed (candidate Committees) Deputy Treasurer's Mailing Address, City, State, & Zip Candidate Support or Opposed (candidate Committees) Deputy Treasurer's Mailing Address, City, State, & Zip Candidate Support or Opposed (candidate Committees) Deputy Treasurer's Mailing Address, City, State, & Zip Candidate Support or Opposed (candidate Committees) Deputy Treasurer's Mailing Address, City, State, & Zip Treasur		Official Committee Email Address	County Clerk or Board of Election Commissioners	
Treasurer's Irmal Address (optional) Deputy Treasurer's Mailing Address, City, State, & Zip Additional Committee Officer's Name & Title (if any) Additional Committee Officer's Name & Title (if any) Connected Organization's Mailing Address, City, State, & Zip Connected Organization's Mailing Address,		Committee Type: ☐ Campaign 💢 Candidate ☐ Continuing (PA	AC) 🗆 Debt Service 🗀 Exploratory 🗀 Political Party	
Deputy Treasurer's Mailing Address, City, State, & Zip Deputy Treasurer's Former Telephone Number Treasurer's Work Telephone Number Deputy Treasurer's Mailing Address, City, State, & Zip Deputy Treasurer's Mailin	3.	Treasurer/Deputy Treasurer Information		
Deputy Treasurer's Mailing Address, City, State, & Zip Deputy Treasurer's Former Telephone Number Treasurer's Work Telephone Number Deputy Treasurer's Mailing Address, City, State, & Zip Deputy Treasurer's Mailin	~	Treasurer's Name (First & Last)	Treasurer's Email Address (optional)	
Deputy Treasurer's Name (if one appointed) Deputy Treasurer's Mailing Address, City, State, & Zip Deputy Treasurer's Home Telephone Number Deputy Treasurer's Mailing Address, City, State, & Zip Additional Committee Officer's Name & Title (if any) Connected Organization's Mailing Address, City, State, & Zip Connected Organization's Mailing Address, City, State, & Zip CANDIDATES: Do you have more than one candidate committee? Yes (refer to instructions on back) No Official Bank Account Information (required by all committees) Candidate Supported or Opposed (candidate committees must include self, if candidate) Name & Mailing Address, City, State & Zip of Candidate Candidate Supported or Opposed (campaign committees must include self, if candidate) Office Sought & Political Subdivision Name of Ballot Measure Election Date & Political Subdivision Support or Oppose		00. Box 24772	(314) 629-86224	
Deputy Treasurer's Mailing Address, City, State, & Zip 4. Additional Committee Information Additional Committee Officer's Name & Title (if any) Connected Organization's Name (if any) Connected Organization's Name (if any) Connected Organization's Name (if any) Connected Organization's Mailing Address, City, State, & Zip CANDIDATES: Do you have more than one candidate committee? Yes (refer to instructions on back) No Official Bank Account Information (required by all committees) 6. Candidate Supported or Opposed (candidate committees must include self, if candidate) Name & Mailing Address, City, State & Zip of Candidate Office Sought & Political Subdivision Deputy Treasurer's Home Telephone Number Connected Organization's Mailing Address, City, State, & Zip Candidate Supported or Opposed (candidate committees must include self, if candidate) Office Sought & Political Subdivision Political Party Support or Oppose Election Date & Political Subdivision Support or Oppose 8. Signature(s) Check certification(s) & sign (required by all committees) Taffirm and attest under penalty of perjury that information and facts in this report are complete, true, and accurate. I		Treasurer's Mailing Address, City, State, & Zip	Treasurer's Home Telephone Number Treasurer's Work Telephone Number	
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6. Candidate Supported or Opposed (candidate committees must include self, if candidate) Charles to Shade (3ry) 699-7622 (Name & Mailing Address, City, State & Zip of Candidate Telephone Number (Candidate Committees Only) Relection Date Office Sought & Political Subdivision Name of Ballot Measure Election Date & Political Subdivision Name of Ballot Measure Election Date & Political Subdivision Support or Oppose 8. Signature(s) Check certification(s) & sign (required by all committees) I affirm and attest under penalty of perjury that information and facts in this report are complete, true, and accurate.	5.			
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further acknowledge that Lam aware that any false statement or declaration/made herein is punishable under Ch. 575 RSMo.				
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Committee Treasurer Cardidate (Candidate Committees Only)		Printy UV	Cardidate (Candidate Committees Only)	